

**Testimony of David Matulis, LCSW
Clinical Social Worker
Before the Appropriations Committee of the Connecticut General Assembly
Public Hearing, Friday, February 20**

Good afternoon, Senator Harp, Representative Geragosian and other members of the Committee.

My name is David Matulis and I am a Licensed Clinical Social Worker. I am speaking in opposition to the proposed closure of Cedarcrest Hospital.

Cedarcrest exists as part of the DMHAS Services System, in which recovery is the guiding principle. Each client will receive services and programs that assist the individual in a personalized manner to better manage his/her illness, achieve personal goals and develop skills and supports leading to living the most constructive and satisfying life possible. Our successful results from JCAHO and CMS surveys over the past several years have demonstrated the impact that the Newington site provides for the clients it serves.

A client on my unit recently wrote down his feelings about the proposal to close Cedarcrest in Newington. He stated, *"Speaking from experience, I have a preference for one state hospital over another, and that is Cedarcrest. Contact with my family in the Hartford area would be curtailed without Cedarcrest. Their quality of care is excellent. The patient population reflects the society in which we live at limited risk, unknown in the outside world. There will always be people who should be hospitalized and Cedarcrest needs to fill that regional need. Without Cedarcrest, lack of treatment for me will lead to suffering among those who experience prejudice. Please do all you can to avoid this collapse."*

I would conclude my thoughts by saying that the staff at Cedarcrest provides specialized services at a local level for complex care needs. Please consider other more viable options before closing Cedarcrest so that clients like mine that have spoken and others whom he is a voice for, can continue their road to recovery without unnecessary detours. Thank you.